



2836

PATENT
ATTORNEY DOCKET NO. 052593-5003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
)	
Noriaki HIRAGA)	Confirmation No.: 7356
)	
Application No.: 09/625,643)	Group Art Unit: 2836
)	
Filed: July 25, 2000)	Examiner: Z. Kitov
)	
For: SEMICONDUCTOR INTEGRATED)	
CIRCUIT DEVICE WITH)	
ENHANCED RESISTANCE TO)	
ELECTROSTATIC BREAKDOWN)	

Commissioner for Patents
Washington, D.C. 20231

AMENDMENT TRANSMITTAL FORM

1. Transmitted herewith is Amendment under 37 C.F.R. § 1.111 and Request for Reconsideration in the response to the Office Action dated November 4, 2002.
2. Additional papers enclosed.
 - ☐ Request for Approval of Drawing Changes
 - ☐ Information Disclosure Statement
 - ☐ Form PTO-1449, references included
 - ☐ Citations
 - ☐ Declaration of Biological Deposit

3. **EXTENSION OF TIME**

The proceedings herein are for a patent application and the provisions of 37 CFR 1.136(a) apply.

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☒ Applicants believe that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

☐ Applicant petitions for an extension of time, the fees for which are set out in 37 CFR 1.17(a)-(d), for the total number of months checked below:

<u>Total Months Requested</u>	<u>Fee for Extension</u>	<u>[Fee for Small Entity]</u>
<input type="checkbox"/> one month	\$ 110.00	\$ 55.00
<input type="checkbox"/> two months	\$ 380.00	\$190.00
<input type="checkbox"/> three months	\$ 870.00	\$435.00
<input type="checkbox"/> four months	\$1,360.00	\$680.00

Extension of time fee due with this request: \$_____.

If an additional extension of time is required, please consider this a Petition therefor.

☐ An extension for __ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

3. Fee Calculation

CLAIMS AS AMENDED						
	Claims Remaining After Amendment		Highest No. Previously Paid	Present Extra	at Rate of	Total Fees
Total Claims	45	minus	45	0	__ x \$18 each=	+\$ 0.00
Independent Claims	4	minus	4	0	__ x \$78 each=	+\$ 0.00
<input type="checkbox"/> First presentation of Multiple dependent claim(s)					\$260.00	+\$
SUB-TOTAL =						\$ 0.00
Reduction by 2 for filing by a small entity						-\$ 0.00
TOTAL FEE =						\$ 0.00